UNITED STATES BANKRUPTCY COURT DISTRICT OF NEVADA

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REQUEST FOR REMOVAL FROM MORTGAGE MODIFICATION MEDIATION PROGRAM REGISTER OF MEDIATORS

Name:	
Bar ID (list all applicable state bar numbers):	
Address:	
Phone Number: E-r	nail Address:
Pursuant to the Mortgage Modification M	Iediation (MMM) Program Procedures, I hereby
request to be voluntarily removed from the Clerk	s's Register of Mediators. I understand that I may
later reapply by filing a new Verification of Qual	lification to Act as Mediator in the Mortgage
Modification Mediation Program (NVB 105-1).	Once removed from the Register of Mediators, I will
not accept any new cases, and I will immediately	contact the court-approved MMM Portal vendor to
discontinue my access to the MMM Portal after of	completing all pending mediations.
I certify under penalty of perjury that all the information on this form is true.	
Ву:	(Signature)
	(Print Name)

THIS FORM MUST BE FILED WITH THE CLERK'S OFFICE AT 300 LAS VEGAS BOULEVARD SOUTH, LAS VEGAS, NV 89101.